

## UNITED STATES SECRET SERVICE DENVER FIELD OFFICE



## SKIMMER DEVICE INCIDENT REPORT

 $\hbox{IF YOU ARE CONTACTED BY ANY BUSINESSES OR FINANCIAL INSTITUTIONS REGARDING A FOUND SKIMMING DEVICE, AT A SPECIFIC LOCATION, \\ \hbox{PLEASE, TAKE THE FOLLOWING ACTIONS:} \\$ 

- O CONTACT THE LOCATION
- O IDENTIFY YOURSELF AND ADVISE TO SHUT DOWN THE AFFECTED PUMP OR ATM, BUT NOT TO REMOVE THE DEVICE(S)
- PRIOR TO OPENING THE PUMP OR ATM, PHOTOGRAPH THE PUMP OR ATM IDENTIFICATION NUMBER
- D IDENTIFY SECURITY CAMERAS & REQUEST PHOTOS/VIDEO
- OPEN PUMP OR ATM AND PHOTOGRAPH THE SKIMMER
- O USING GLOVES, PLACE THE SKIMMER IN AN EVIDENCE BAG
- SEND THIS REPORT TO <u>DENVER.SKIMMING@USSS.DHS.GOV</u> ALONG WITH PHOTOS
- O BRING SKIMMERS TO THE DENVER FIELD OFFICE, 5619 DTC PARKWAY, STE. 400, GREENWOOD VILLAGE, CO. 303-850-2700

REPORTING DATE	INVESTIGATOR(S)
NAME AND ADDRESS OF MERCHANT	MERCHANT'S POINT-OF-CONTACT INFORMATION
NAME AND ADDRESS OF MERCHANT	MERCHANT STORY-OF-CONTACT BY ORMATION
CONSENT-TO-SEARCH (FORM OR VERBAL AND WITNESS(ES))	IS THERE VIDEO FOOTAGE OF LOCATION WHERE DEVICE(S) WAS FOUND?
HOW LONG IS VIDEO RETAINED?	HAS MERCHANT DISCOVERED/REPORTED PREVIOUS SKIMMERS FOUND, AT THIS LOCATION (YES OR NO)?
WHICH AGENCY? CASE NUMBER? DATE OF REPORT?	NAME AND PHONE NUMBER OF COMPANY THAT PROVIDES TECHNICAL SUPPORT TO PUMPS/ATMS?
PUMP(S)/ATM(S) MANUFACTURER	LOCK(S) MANUFACTURER
FREQUENCY OF PUMP(S)/ATM(S) INSPECTION	MERCHANT ID FOR PUMP/ATM STATION(S)
DESCRIBE LOCATION OF PUMP(S) WHERE SKIMMER(S) WAS LOCATED IN RELATIONS TO THE CASHIER'S LOCATION	DESCRIBE THE SECURITY FEATURES ASSOCIATED WITH THE PUMP(S) (E.G. SECURITY TAPE AND LEDGER, STORAGE LOCATION OF THE KEYS, ETC.)
NUMBER OF DEVICE(S) FOUND AT LOCATION	TYPE(S) OF DEVICE(S) FOUND AT LOCATION
APPROXIMATE DATE OF INSTALLATION	ADDROVIMATE DATE(C) OF LICE
APPROXIMATE DATE OF INSTALLATION	APPROXIMATE DATE(S) OF USE
DESCRIPTION OF INCIDENT	
REPORT PREPARED BY	DATE PREPARED
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